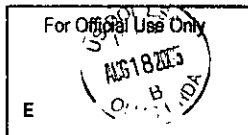


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 88-237, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.




READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

| | |
|---|---|
| 1. File Number U - 11076 | 2. Fiscal Year Covered From: 1 / 1 / 2004 Through: 12 / 31 / 2004 |
| 3. Name and address of person filing. Name Martin R Stamba II P.O. Box, Bldg., Room No., if any Street 3201 East McKnight Road City Pittsburgh State Pennsylvania ZIP Code +4 15237 | 4. Name, file number, and address of labor organization. Name International Brotherhood of Boilermakers Labor Organization File Number 000-074 P.O. Box, Building and Room Number, if any Street 753 State Avenue Suite 570 City Kansas City State Kansas ZIP Code +4 66101 |
| 5. Position in labor organization. International Representative | |

Enter appropriate data below if, during the past 12-month, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

| | |
|--|--|
| A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. | |
| 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State | 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. |

Signature

| | | |
|--|--------------------|------------------------------|
| 15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.) | | |
| Signed <u></u> | On <u>8/8/2005</u> | <u>(412) 367-1007 ext 13</u> |
| | Date | Telephone Number |

| | |
|--|-----------------------|
| Name of Person Filing Martin Stanton II | File Number U- |
|--|-----------------------|

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

| | |
|--|---|
| 8. Name and address of Business (including trade name, if any). Name Northeast Area Apprenticeship Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 297 Burnside Avenue City East Hartford State Connecticut ZIP Code +4 06108 | 9. Business deals with: <input checked="" type="checkbox"/> a. Labor Organization b. Trust c. Employer |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code +4 | 11.a. Nature of such dealing. Provides Craft /Trade Training to our members in the Northeast Area <hr/> 11.b. Approximate dollar value of such dealing. \$2,594,604 12.a. Nature of interest held or income received. Northeast Area Apprenticeship Full Board Meeting. Reimbursed expenses for travel and lodging incurred during meeting. <hr/> 12.b. Amount. - Approximately. \$262 |

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

| | |
|--|---|
| 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code +4 | 14.a. Nature of payment. |
| 13.b. Is the Business an Employer or Consultant ? | 14.b. Amount of payment. |

Name of Person Filing **Martin Stanton II**

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).Name **Northeast Area Apprenticeship**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street **297 Eurnside Avenue**City **East Hartford**State **Connecticut** ZIP Code + 4 **06108****9. Business deals with:**☒ a. Labor Organization

b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.**Provides craft/trade training for our members in the Northeast Area.****11.b. Approximate dollar value of such dealing. \$2,594,604****12.a. Nature of interest held or income received.****Meting and dinner to discuss recruitment and possible training improvements in the Northeast Area.****12.b. Amount. - Approximately. \$115**

Name of Person Filing **Martin Stanton II**File Number **U-****Part B Continuation Page**

B. Held an interest in or derived income or capital for profit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).Name **Common Arc Corporation**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **P.O. Box 110**

Street

City **Geneva**State **Illinois** ZIP Code + 4 **60134****9. Business deals with:**☒ **a. Labor Organization****b. Trust****c. Employer****10. If 9.b. or 9.c. is checked give trust or employer's name.**

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Common Arc's purpose is to foster and advance the interest of construction Boilermakers. Common Arc developed and maintains a database of certified welders for the Boilermaker Construction Industry.

11.b. Approximate dollar value of such dealing. \$13,000,000**12.a. Nature of interest held or income received.**

Worked on the Common Arc Audit Team in 2004 for the annual audit. Reimbursement for travel, lodging, and meals received during the audit.

12.b. Amount- Approximately. \$617